FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Chiao Judy					2. Issuer Name and Ticker or Trading Symbol Cyclacel Pharmaceuticals, Inc. [CYCC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								>	Officer below)	(give title		Other (s below)	·	
200 CONNELL DRIVE,					02/18/2015									V.P.	, Clin. De	ev. &	Reg. Aff.		
SUITE 1	500 			-													(2)		
(Street)				4.	If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
BERKEI HEIGHT	N	Y NJ 07922								7	Form f	led by Mor	•	orting Perso n One Repoi	- 1				
(City)	(S	tate)	(Zip)									Persor	l						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ear)	2A. Deeme Execution if any (Month/Da	Date,	Code (ransaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4				es For ally (D) Following (I) (r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3 a	ction(s)			(Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code (In:				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisab		Expiration Date	Title	or No	umber						
Option	\$0.86	02/18/2015		A		42,940		(1)	0)2/18/2025	Common	¹ 4:	2,940	\$0 ⁽²⁾	42,940)	D		

Explanation of Responses:

- 1. These securities are exercisable over a three-year period, with 1/36 of the options granted vesting on a monthly basis.
- 2. These securities were granted to Judy Chiao under the Issuer's Amended and Restated 2006 Equity Incentive Plan as part of the Issuer's annual equity compensation to executive officers.

/s/ Judy Chiao

02/20/2015

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.